* PATENT APPLICATION FEE DETERMINATION RECORD Fifective October 1, 2001 Application or Docket Number												1		
•	Elidoute Comport, 2001													
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			15					RAT	E	FEE		RATE	FEE	
FOR 12 04 01			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS		15 minus 20=		• 0			XS	3-	• .	OR	X\$18=	0		
INDEPENDENT CLAIMS			3 minus 3 =		0		·	X42	<u>;</u>		OR	X84=	0	
MULTIPLE DEPENDENT CLAIM PRESENT						. 🗆		+14)= -		OR	+280=	O	
* If the difference in column 1 is less than zero, enter "0" in column 2									AL		OR	<u> </u>	740.00	
	.) (Cl						OTHER							
Ď	7/25/05				mn 2) (ESY	(Column 3)		SMA	L	ENTITY	OR	SMALLE		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RAT	Œ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 15	Minus	· 7	ସ	• -		XS:) =		OR	X\$18=		
	Independent	• 3	Minus	444	3	- 0		X42	<u>:</u> =		OR	X84=		
٢	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+14	na Na		OR	+280=		
12/13/05								47	TAL		OR	TOTAL		
1	(Column 1) (Column 2) (Column 3)								FEE		10	ADDIT. FEE		
MTB		CLAIMS REMAINING AFTER		HIG NUI PREV	HEST ABER IOUSLY	PRESENT EXTRA	1	RA	ΓE	ADDI- TIONAL		PATE	ADDI- TIONAL FEE	
AMENDMENT B	Total	AMENDMENT	Minus	* 7	FOR	.0	1	XS	93	FEE	OR	X\$18=	- T-E-	
KEN	Independent	• 3	Minus	***	3	· ~	1	X4:	 2=		OR	V04-		
Ľ	PIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										1	200		
·									O= OTAL		OR	TOTAL		
1									FEE	. 2	OR	ADDIT. FEE		
_	•	(Column 1) CLAIMS		HIG	JMN 2) HEST	(Column 3	4		_	ADDI-	1		ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER MOUSLY D FOR	PRESENT EXTRA		RA	TE	TIONAL FEE		RATE	TIONAL	
	Total	•	Minus	••		-		X\$	9=		OR	X\$18=		
	Independent	•	Minus	944		1-]	X4:	2=	1	OR	YOA		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							├	_		1			
* If the entry in column 1 is tess than the entry in column 2, write "0" in column 3.												TOTAL		
-	If the "Highest No	imber Previously F	Paid For IN TH	IS SPACE	is less the less the	ian 20, enter "2 ian 3. enter "3."	•	ADDIT	FEE		OR	ADDIT. FEE		
	The "Highest Nur	mber Previously Pr	aid For (Total C	r ingsber	rcent) is c	A LIBVAN UNW	wes to		ua et	hhighista od	at th C			

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